

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>12/13/02</u>		2 Serial/Patent # <u>09/682,285</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	7	10/24/02	\$ 130
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
			7 TOTAL AMOUNT OF REFUND	\$ 130
10 REASON:		8 TO BE REFUNDED BY:		
	Overpayment	Treasury Check		
	Duplicate Payment	Credit Deposit A/C #:		
	No Fee Due (Explanation):	9 <span style="border: 1px solid black; padding: 2px;">0</span> <span style="border: 1px solid black; padding: 2px;">9</span> <span style="border: 1px solid black; padding: 2px;">--</span> <span style="border: 1px solid black; padding: 2px;">0</span> <span style="border: 1px solid black; padding: 2px;">8</span> <span style="border: 1px solid black; padding: 2px;">6</span> <span style="border: 1px solid black; padding: 2px;">2</span>		
PTO error				
11 REFUND REQUESTED BY: <u>PC TAD/6</u>				
TYPED/PRINTED NAME: <u>PC TAD/6</u>		TITLE: <u>Petitions Att</u>		
SIGNATURE: <u>[Signature]</u>		PHONE: <u>103 308 0765</u>		
OFFICE: <u>Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>Aileen Kelle</u>		DATE: <u>12/17/02</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**